Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target				
2006-07	100% of noncompliance will be corrected as soon as possible but in no case later than one year from identification				

Actual Target Data for 2006-07:

Missouri did not meet the 100% target for correction of non-compliance within twelve months.

A total of 9 DMH regional centers, 20 independent service coordinators and 52 service providers received initial monitoring reviews during 2005-06. Results of these reviews are provided in the tables below. The columns of the tables are as follows:

- # of EI providers monitored the total number of providers monitored in the specified area or the number of providers with noncompliance calls as a result of dispute resolution
- # of Findings of noncompliance identified in 2005-06 the total number of monitoring indicators found out of compliance across the providers reviewed. This is a duplicated count of providers when providers had more than one finding of noncompliance
- # of Findings for which correction was verified no later than one year from identification the total number of findings of noncompliance corrected within one year from the date of the reports to providers
- % of findings with correction within one year the percent of findings of noncompliance corrected within one year
- % of finding with correction as of July 2007 the percent of findings of noncompliance that had been corrected by the end of July 2007.

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Indicator	General Supervision System Components	# of EI providers monitored	(a) # of Findings of noncompliance identified in 2005-06	(b) # of Findings from (a) for which correction was verified no later than one year from identification	% of findings with correction within one year (b)/(a)	% of finding with correction as of July 2007
1: Timely Services	Monitoring: On-site visits, self- assessment, desk review, etc.	78	139	137	98.6%	100.0%
	Dispute Resolution		0	NA		
2: Natural Environments	Monitoring	26	13	13	100.0%	100.0%
	Dispute Resolution		0	NA		
3: Early	Monitoring	26	14	14	100.0%	100.0%
Childhood Outcomes	Dispute Resolution		0	NA		
4: Family Capacity	Monitoring	26	120	111	92.5%	100.0%
	Dispute Resolution		0	NA		
5, 6: Child Find	Monitoring	0	0	NA		
	Dispute Resolution		0	NA		
7: 45-day Timelines	Monitoring	10	1	1	100.0%	100.0%
	Dispute Resolution		8	8	100.0%	100.0%
8A: Transition Steps and Services	Monitoring	26	83	73	88.0%	100.0%
	Dispute Resolution		0	NA		
8B: Transition Notification of LEA	Monitoring	26	44	38	86.4%	100.0%
	Dispute Resolution		0	NA		
8C: Transition Conference	Monitoring	26	22	15	68.2%	100.0%
	Dispute Resolution		1	1	100.0%	100.0%
Total		445	411	92.4%	100.0%	

Three (3) independent service coordinators with findings of noncompliance are not included in the table above. These service coordinators left the First Steps system shortly after being monitored, and were not employed by a SPOE after February 1, 2006. It was not possible to follow up on correction due to the minimal time frame between the issuance of the corrective action and their departure from the system;

however, any individual child noncompliance attributed to them was corrected after reassignment to a new service coordinator. In addition, findings of noncompliance for two (2) early intervention providers who left the First Steps system shortly after receiving their corrective action letter were not included in the table above. The lead agency assigned the responsibility for any individual child noncompliance to the service coordinators for the children involved. In cases where services had not been provided in accordance with the IFSP, the service coordinators ensured that compensatory services were considered and provided, as determined appropriate.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

The state did not meet the target of 100% for this indicator, and showed slippage of approximately 3% from the previous APR. The slippage is attributed to the system being in a state of flux during the 2006-07 year and to the variety of types of monitoring reviews conducted in 2005-06. Due to the systems currently in place, significant improvement with this indicated is expected in the future.

Improvement activities for 2006-07 included the following:

- Revise sanctions in state regulations and provider contracts
- Deploy consultants to specific SPOEs or providers based on data reviews and other information
- Implement web-based system for monitoring and self-assessment purposes
- Fully implement IFSP Quality Indicators Rating Scale to assess quality as well as procedural compliance

Discussion of these improvement activities follows:

Revise sanctions: Missouri has not changed its state regulations or provider contracts, but will do that in conjunction with the finalization of federal regulations.

Deploy consultants: The lead agency has utilized consultants to assist SPOEs, DMH, and EI providers with specific issues identified through data and compliance monitoring reviews. Throughout 2006-07, these consultants were deployed to gather information and provide technical assistance as needed, to help ensure that EI providers and SPOE/DMH staff was informed about and operating under compliant procedures.

Implement web-based monitoring system: Missouri awarded a contract for the development of a web-based general supervision system, known as IMACS (Improvement Monitoring, Accountability and Compliance System), for both Part C and Part B in June 2006. As of December 2007, a large part of the Part B monitoring system has been developed. Development of Part C components has begun and will include the SPOE Quarterly Reports, QIRS reviews/data, compliance file reviews and corrective action plans. The system will send regular reminders to SPOEs, DMH and DESE regarding the status of noncompliance that has not yet been cleared in order to ensure correction within one year.

IFSP Quality Indicators Rating Scale: The IFSP Quality Indicators Rating Scale (QIRS) process was developed by lead agency staff, in conjunction with nationally recognized early childhood experts, to provide a "quality" evaluation instrument used to evaluate IFSPs. Throughout the year, the First Steps consultants provided training and technical assistance to each SPOE and DMH service coordinator regarding the QIRS process and expectations. QIRS reviews were conducted in all SPOE regions and targeted technical assistance was provided on specific issues identified during those reviews.

The SPOE contracts require that the region receive an overall score on the QIRS review in the "acceptable" to "high quality" range or liquidated damages will be applied to the next year's contract. For the 2006/2007 fiscal year, two (2) of the ten (10) SPOE regions received ratings below the acceptable level; therefore, the penalty was applied to the contract renewal for the 2007/2008 fiscal year.

The area directors will review the QIRS results with each SPOE office and hold training activities targeted to continue strengthening the quality of IFSP development. These efforts are intended to ensure that all children and families receive high quality intervention services through the First Steps program.

Correction of Noncompliance: The 2005-06 APR reported that the noncompliance identified for that year had all been corrected within 12 months with the exception of one DMH Regional Center. The Regional Center under sanction from May 11, 2007 to December 31, 2007, was required to submit monthly data documenting all transition meetings held and reasons for exceeding timelines, if applicable. The Regional Center corrected the last area of noncompliance in December 2007. A final report was sent in January 2008, notifying them that the noncompliance had been cleared.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.